



Marston Montgomery Primary School

Physical Intervention Policy

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Health & Safety Guidance
Children & Younger Adults Department

PHYSICAL INTERVENTION
(RESTRAINT)

Review Date	Changes Required	Name & Position

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DERBYSHIRE COUNTY COUNCIL
GUIDELINES ON PHYSICAL INTERVENTION (RESTRAINT)

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DERBYSHIRE COUNTY COUNCIL GUIDELINES ON RESTRICTIVE PHYSICAL INTERVENTION (RESTRAINT)

Executive Summary

This document sets out the Local Authority's position as regards to the use of physical interventions and the context in which physical intervention may be used.

Derbyshire County Council (DCC) maintains that physical intervention should only be used as a last resort, the final element of a process aimed at the prevention and management of behavioural difficulties. However, if physical interventions need to be used then this policy and associated guidance should be followed.

This policy covers all services and settings where it may be necessary to use physical interventions within the Children and Younger Adults (CAYA) and Adult Care Departments and the Youth Offending Service. This also includes schools and other educational settings, day care, residential care, early years and disability services. It also has relevance, for partner agencies and those organisations who provide services on behalf of the local authority.

Throughout this document the term "staff" is used to include DCC employees, teachers and other school staff, residential staff, health workers, staff employed by organisations providing services on behalf of DCC, foster carers and volunteers.

Similarly, "pupils and service users" is used to refer to all children and young people in schools and who are users of services and adults who use services.

POLICY STATEMENT

Policy Statement

Derbyshire County Council (DCC) recognises its Duty of Care towards pupils, service users and staff to ensure their safety and health. This applies to any situation where physical interventions have to be used. DCC acknowledges that it is important to consider the use of physical intervention within the broader context of providing social care and education services.

DCC's position is that reasonable force to control or restrain pupils and service users will only be appropriate as a last resort. Physical intervention is not a substitute for the full range of professional approaches to behaviour management and techniques to minimise or avoid confrontation that DCC already has in place. This means that:

- all DCC employees involved in situations where restrictive physical intervention may be needed will have access to appropriate approved training. The council will support staff that carry out physical interventions in line with this policy, associated guidance and training.
- DCC expects that all organisations delivering services for and on its behalf to meet these standards and have a suitable policy and arrangement in place.
- DCC is committed to ensuring it takes account of all applicable legislation in this field and to ensure this policy is reviewed in light of any changes.
- DCC will adopt a co-ordinated approach to physical interventions which allows for consistency of delivery for both staff, pupils and service users whichever council service they are accessing.
- DCC will work in partnership with external agencies wherever possible to provide the best outcomes for pupils and service users.
- DCC recognises the legal right of employees to use reasonable force to prevent pupils and service users committing a criminal offence, injuring themselves or others or damaging property, and to maintain good order or discipline.
- DCC will uphold the rights of people and never countenance the use of physical intervention as a form of punishment abuse or with the intention to cause pain or injury.
- DCC will seek, wherever possible to ensure that the possible need for physical intervention is anticipated and that appropriate responses are planned and agreed with the person or their parent/carer or advocate.

INTRODUCTION AND GENERAL GUIDELINES FOR ALL SETTINGS

Context

This Policy provides a common framework of support to all establishments and services within the CAYA and Adult Care Departments and the Youth offending Service which sets out agreed principles and definitions for the use of physical interventions.

Because different legislation, regulations and guidance apply to different settings each specific service sector will need to produce its own more detailed guidance for the actual use of physical interventions in its area of work.

This overarching policy provides a framework which sets out the principles and definitions within which this sector-specific guidance should be produced to give a consistency of approach to how staff judgements are made and how specific incidents are addressed throughout the Authority.

The purpose of this policy and any guidance written to support it is:

- to set clear expectations about the use of physical touch/support
- to set clear definitions of what is meant by physical intervention
- to provide a framework for establishments/sectors to produce their own guidance
- to protect the interests of all clients and pupils and their parents/carers/advocates/service users
- to protect staff in the fulfilment of their responsibilities
- to protect the Authority which ultimately has responsibility for the actions of the staff

Legal Background

Any practice in which the civil, legal or human rights of a pupil or service user may be infringed must be fully justifiable. As a result, making a decision about the use of any physical intervention, particularly a restrictive one, naturally raises anxiety which could lead to a failure to act.

Equally, however, opting to do nothing is as much a decision as responding. Staff owe a duty of care to those in their charge and in some circumstances failure to intervene in a situation could be viewed as negligence.

As well as the general legal duty of care owed to pupils or service users by staff both under Health & Safety and civil legislation. There are specific pieces of legislation which apply in the education and health & social care sectors which authorise the use of physical interventions in specific circumstances and requires that these are recorded.

The legislation which applies is as follows:

- Section 93 of the Education & Inspections Act 2006

- Children's Homes National Minimum Standards and Regulations 2002¹
- Fostering Services National Minimum Standards and Regulations 2002²
- Section 246 Apprenticeships, Skills, Children and Learning (ASCL) Act 2009

NB other legislation will need to be added here from time to time as legislation is introduced or amended.

These will be dealt with as they apply in detail to various operational areas in the sector specific guidance that fits underneath this policy. There are however common legal principles that apply across all areas.

Physical interventions using reasonable force having considered all the circumstances of the situation can legitimately be used to prevent pupils and service users from doing or continuing to do any of the following:

- Committing any criminal offence (or for a young person under the age of criminal responsibility what would be an offence for someone older)
- Causing serious damage or injury to property, equipment or persons. (Damage will always be serious if it provides a person with a weapon or potential weapon, involves self harm or harm to others, exposes conditions which could cause a safety risk, or involves arson or potential arson)
- (for schools only) Prejudicing the maintenance of good order and discipline at the school or among any pupils receiving education at the school, whether during a teaching session or otherwise.

The statutory powers confirmed by the specific pieces of legislation are in addition to the common law power of any citizen in an emergency to use reasonable force in self defence or to prevent another person from being injured or committing a criminal offence.

Physical contact with Children Young People and Service Users

It is important to consider the use of physical interventions within the broader context of the use of physical touch.

"Physical touch" is an essential part of human relationships. Within the services provided by the Authority staff may well use touch to prompt, to give reassurance, to provide support in a curriculum activity, e.g. PE or in the provision of a care service.

In recent years, however, the subject of physical touch, and in particular the use of restrictive physical interventions, has become a focus of concern and staff understandably feel uncertain. This guidance is put in place to allow staff to provide appropriate services confidently and safely.

The main factor which distinguishes touch from physical intervention is the degree of force applied, the intention of the action and how the action is perceived by the person receiving it.

It is unrealistic to suggest that staff should touch a pupil or service user only in emergencies. For some people touch can provide welcome reassurance or comfort in challenging or distressing

¹ http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4021209.pdf

² http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4073566.pdf

circumstances. Equally touching may also be appropriate when congratulating or giving praise.

Staff must, however, bear in mind that even perfectly innocent actions can sometimes be misconstrued and must, therefore, conduct themselves accordingly, using their professional judgement.

Staff will also need to bear in mind that there may be some people for whom touching is particularly unwelcome. This may be due to their cultural background, individual sensitivities or as a consequence of having been abused. It is important that staff are aware of these issues and that the setting/section has a system to ensure staff are informed of these matters. Services and settings will need to have practice standards that are age, ability and gender appropriate and sensitive to religious and culture backgrounds.

Physical intervention is therefore not the only circumstance when there is physical contact between staff and children or young people. Staff should respond to people in a way that gives expression to appropriate levels of care and to provide comfort to ease distress.

DCC endorses the appropriate and professional use of physical touch and support. However, it does not support inappropriate physical contact between staff and pupils or service users. Staff need to ensure that any physical contact is not misinterpreted. To use touch/physical support successfully, staff will need to adhere to the following.

It must:

- be non-abusive, with no intention to cause pain or injury;
- be in the best interests of the person;
- have a clear educational or care purpose;
- be sensitive to an individual's personal history or preferences;
- take account of a range of diversity issues such as gender and disability, culture, religion.

Guiding Principles for use of Physical Touch

It is essential that staff are aware of any person who finds physical touch unwelcome. Such sensitivity might arise, for example, from the person's cultural background, individual needs, personal history or age.

Headteachers and managers should ensure that there is a system in place within their area of control that enables the sharing of appropriate information between staff.

Staff should follow these guiding principles:

- The level and type of physical contact should reflect the educational, individual and social care needs of the person
- Physical contact should not respond or lead to expectations or anxieties of any form and should not become habitual
- Although staff should not respond automatically to any person asking for physical comfort that person should not be rejected without explanation
- Staff need to be aware of the reaction of the person to touch and modify their behaviour accordingly
- Staff should not allow their own emotions to compromise a professional response
- Specific consideration should be given to the needs of a person who may have suffered abuse and/or neglect.

- Where necessary physical contact should be planned and recorded in a Physical Intervention Plan as well as for any Care Plan. For Children's residential settings this will be the safe care plan and individual placement plan
- There should be no general expectations of privacy for the physical expression of affection or comfort in any circumstance. Staff must endeavour not to be alone with a child or young person in such situations and where they are, safeguards should be in place e.g. support nearby (within calling distance).

Physical Interventions

Physical intervention is a very broad term that covers a whole range of actions. They can be generally categorised into two types:

i) restrictive forms of interventions

Restrictive Physical Interventions (RPIs) involve the use of force to control a persons behaviour or to disengage from dangerous or harmful physical contact and can be employed using bodily contact, equipment or changes to a persons environment. The use of force increases the risks to the person and staff concerned and inevitably affects personal freedom and choice and so should always be a last resort.

ii) non-restrictive methods

The different forms of physical intervention are summarised below:-

	Bodily contact	Equipment	Environmental change
Non restrictive	Manual guidance to assist a person walking	Use of a protective helmet to prevent self injury	Removal of the cause of distress, for example adjusting temperature, light or background noise
Restrictive	Holding a person's hands to prevent them hitting someone	Use of arm cuffs or splints to prevent self injury	Time out in another area

As well as defining physical interventions with the two categories above it is important to define that these interventions can be required in two distinct situations.

Emergency/unplanned	Use of force which occurs in response to unforeseen events. Examples may include preventing a person running off a pavement into a busy road or preventing a pupil hitting another with a dangerous object e.g. a hammer in a technology lesson.
Planned Intervention	In which staff employ, where necessary, pre-arranged strategies and methods which are based upon a risk assessment and recorded in an individual plan for the management of the behaviour of a pupil or service user

Due to the risks involved in and the concerns of staff this policy focuses in general on the use of restrictive physical interventions and the use of force. Staff should make every effort to avoid acting in a way that might reasonably be expected to cause injury. However in the most extreme circumstances it may not always be possible to avoid injuring the pupil or service user.

Even if staff follow this policy and associated guidelines, and the training they have received it is possible that a parent/carer or advocate, the pupil or service user or another staff member may challenge their actions.

The council considers this policy and its associated guidance to be good practice. The council will fully support any staff acting appropriately within the scope of this policy and guidance and in accordance with any associated training.

Guiding Principles for use of Physical Interventions

1. Physical interventions will be used as infrequently as possible and only as a last resort
2. Physical Interventions will only be used in the best interests of the person
3. A suitable and sufficient risk assessment should be in place for all planned physical interventions
4. Except in emergency situations physical interventions will only be used after a full range of behaviour support techniques have been exhausted
5. Except in emergency situations physical interventions will be planned and will be agreed

- with the person and where necessary their parent/carer and/or advocate
6. Suitable and sufficient risk assessment should also be produced for all unplanned risk assessments where it is predictable that these could occur (e.g. breaking up a fight in a school/residential children's home)
 7. The only planned physical interventions used will be those authorised by the British Institute of Learning Disabilities (BILD) and which are taught as part of a BILD accredited training package
 8. Physical interventions will never be used to punish, discipline or inflict pain on a person
 9. Physical interventions will always involve the minimum amount of force for the minimum amount of time
 10. Physical Interventions must never be used purely for staff convenience

Reasonable Force & Staff Judgement

The term reasonable force is used throughout this and other policy, guidance and statute relating to physical intervention.

There is no statutory definition of 'reasonable force'. Whether the force used is reasonable will always depend on the circumstances of the individual case. Deciding on whether the use of force is justified will depend in part upon the context in which the specific incident occurs. The test is whether the force used is proportionate to the consequences it is intended to prevent. The degree of force used should be the minimum needed to achieve the desired result. Use of force could not be justified to prevent trivial behaviour.

Staff will be expected to use their experience, training and knowledge to determine whether or not a situation is trivial based on the circumstances.

For example a pupil running away down a corridor where there is no other specific risks might normally be considered trivial. However an older pupil running uncontrolled in a corridor crowded with younger children may be considered dangerous enough not to be trivial.

If staff decide the situation is not trivial due to the risk of injury and other strategies (e.g., shouting for the pupil to stop running) have had no effect, then physical intervention would be justified.

Written guidelines cannot anticipate every situation and use of physical interventions are a high risk action and sound judgement of staff is crucial. This judgement may be to not physically intervene personally due to the personal risk involved but to summon help. Staff need to be aware that their employment places upon them a duty of care in order to maintain an acceptable level of safety. This duty of care has been defined and tested in a variety of legal cases.

What needs to be made very clear to staff is that if the situation is not trivial then it is not acceptable simply to do nothing.

Staff also need to be aware that the locking of rooms with the purpose of restricting an individual's liberty is expressly forbidden and may constitute an offence other than in accommodation designated for that purpose and regulated accordingly (for example, a secure unit)

Risk Assessment

Risk Assessments are a crucial part of managing restrictive physical interventions. Leadership teams are advised to assess the frequency and severity of incidents requiring force that are likely

to occur in their establishment.

Risk assessments need to be carried out for any situation and / or individuals where there are planned interventions and need to consider both the risks to the individual and any staff member involved.

More detailed guidance on risk assessments will be detailed in the sector specific guidance attached to this overarching policy.

Training

It is essential that staff who are or are likely to be involved in physical intervention receive appropriate training. This includes not just training on the interventions themselves but also on the full range of measures that should occur before this stage is reached.

DCC currently endorses training on the PROACT_SCIPr_UK® approach and your Sector Specific Guidance will provide more details on how you can access this.

Planning For Incidents

If a setting is aware that a pupil or service user is likely to behave in a way that may require physical intervention, it will be sensible to plan how to respond if the situation arises. These situations may include prior knowledge before the pupil or service user first attends the establishment or as a consequence of several incidents involving a particular person whilst attending the establishment.

As far as practically possible establishments should make staff who come into contact with such people aware of the relevant characteristics of those individuals, particularly:

- a) situations that may provoke difficult behaviour, preventive strategies and what de-escalation techniques are most likely to work;
- b) what is most likely to trigger a violent reaction, including relevant information relating to any previous incident requiring use of force;
- c) if physical intervention is likely to be needed, any specific strategies and techniques that have been agreed by staff, parents/carers/advocates and the person concerned.

That planning needs to take account of:

- Managing the pupil or service user through appropriate agreed reactive strategies to diffuse conflict and the appropriate methods of physical intervention which should be used if these fail;
- Parental or carer involvement to ensure they are clear about what specific action the establishment might need to take; Parents/carers/advocates may well have valuable information about what may trigger certain behaviours, what preventative strategies can be employed and what de-escalation techniques are most likely to work. Clearly some of this information may be sensitive and permission ideally in writing should be obtained to pass the information to staff who need it. However where this consent is unreasonably withheld then the information may still be given to staff who need it where minimising the chances of force being required would be in the vital interests of the person concerned.
- Briefing staff to ensure they know exactly what action they should be taking, which may identify a need for training or guidance;
- Ensuring that additional support can be summoned if appropriate;
- Knowledge of the pupil's or service user's previous experience of physical restraint and their

- predicted reactions;
- The presence of any weapons or objects that can be used as weapons or information relating to whether there is a history of weapons being used or carried.
- Medical advice about the safest way to physically restrain a pupil or service user with specific health needs;
- The potential need for a physical intervention plan which might include reference to situations when physical intervention would be appropriate, options for intervention, appropriate authorised staff trained to deal with such situations, who might be called to assist, arrangements to record events;
- Any staff training requirements;
- Whether a specific Physical Intervention Plan needs to be included in any Behaviour Management Plan.

Staff working in situations where there is a reasonable likelihood they may have to employ physical intervention should consider whether their or the persons clothing, footwear, jewellery and hairstyle add to the danger of injury to themselves or others and take appropriate action.

It is also wise to plan for less predictable incidents by making staff aware of what they are reasonably expected to do to manage such an incident through positive avoidance or physical intervention, (an example might be how to deal with a fight between pupils or service users).

Situations where staff should not normally intervene without help

Sometimes an authorised member of staff should not intervene in an incident without help, unless it is in an emergency. Establishments should have communication systems that enable a member of staff to summon rapid assistance when necessary. Help may be needed in dealing with a situation involving an older or larger person, more than one person or if the authorised member of staff believes he or she may be at risk of injury. In these circumstances he or she should take steps to remove other people who might be at risk and summon assistance from other authorised staff or where necessary phone the police.

Recording Events and Actions

It is important for all establishments to have a clear and consistent procedure for reporting and recording all significant incidents of physical intervention which all staff are aware of.

Establishments may find the following questions helpful in deciding whether an incident is significant and requires a written record:

- Did the incident cause injury or distress to a pupil, service user or member of staff? (if there was an injury an accident report form will also need to be completed).
- Even though there was no apparent injury or distress, was the incident sufficiently serious in its own right to require a written record? Any use of restrictive holds would, for example, fall into this category.
- Is a written record needed to be able to justify the use of force? This is particularly relevant where the judgement was very finely balanced.
- Is a record needed to help identify and analyse patterns of pupil or service user behaviour or staff training needs?
- Were other agencies involved, such as the police?

If the answer to any of these questions is “yes” services and settings must ensure there is a written

record of the incident, and staff therefore should be made aware of this. Such records can provide evidence of defensible decision making in the event of a subsequent complaint or investigation.

Arrangements should be made to ensure that all significant incidents of physical intervention are recorded by the member(s) of staff involved as soon as possible after the event. Incidents should be reported to the Headteacher or manager as soon as is practicable.

- A standard format for recording any incident, not just the physical intervention on pupil or service user, is good practice.
- There should be a special "Incident Book" or file with appropriately formatted pages.

Any entries must be made by the member(s) of staff involved or witnessing an incident and they should sign and date the record of the incident.

The Report Must Include:

- Details of when and where the incident took place (a sketch plan will be helpful);
- Circumstances and significant factors which led to the incident;
- Details of any behaviour management strategies used and how successful these were;
- The duration and nature of any physical intervention used;
- The names of children, young people, clients, staff, and other adults involved, and of all witnesses;
- A description of any injury sustained by pupil or service user, staff and others, as well as subsequent medical attention;
- A description of any action taken after the incident;

If a series of repeated but separated incidents occur in a day the reports should be kept together so that a clear picture of the pupil or service users behaviour is built up through clear recording.

It is acknowledged that some pupils and service users will have particular special educational needs may need frequent holding or physical intervention.

The Incident Book or file should be readily available for inspection by designated DCC officers and/or the Governing Body or external inspectorates.

Recording Incidents

An incident report form for recording incidents which can be used by establishments who don't currently have their own system of recording incidents which meets the criteria above, is included as Appendix 1 of this document.

The establishment should inform parents or carers about any incident of physical intervention involving their child or young person as soon as practicable after the incident.

Where the incident is of a serious nature and further action may follow, witnesses should be asked for a statement.

This should be carried out by a senior member of staff as soon as practicable after the incident.

When taking a witness statement from another person, the following points should be considered:

- Avoiding the risk of collusion; take statements individually as soon as possible after the event.
- Avoiding leading questions;
- Having a quiet place in which to record the statement;

- Considering the language skills of a child or vulnerable adult witness;
- The appropriateness of asking a witness to write their own statement;

If at any stage in this process the Head teacher or senior member of staff considers that the incident itself should be referred for action in accordance with Child/Vulnerable Adult Protection Procedures, all investigations must stop.

Statements, either from those involved or from witnesses, should then be taken only in accordance with Child Protection/Vulnerable Adult Procedures.

Subsequent Action

The following are issues the establishment may need to consider following physical intervention:

- Staff should ensure that the pupils and service users has regained self-control and no longer poses a threat to self or others.
- Any injuries to the pupils and service users should be assessed and dealt with within the establishments existing procedures including seeking medical attention where necessary.
- The pupils and service users should be allowed time to regain composure before staff offer a process of counselling.
- Any injuries and trauma to staff should be assessed and dealt with within the establishment's existing procedures including time away from the situation to recover and seeking medical attention where necessary.
- All injuries should be recorded following the Local Authority Accident (and Assault if necessary) reporting procedures as well as any record of the physical intervention, on the physical intervention recording form.
- All incidents involving the physical intervention of a pupils and service users must be discussed as soon as possible with a senior member of staff and the Headteacher or manager should be involved as soon as practicable.
- An account of these discussions should be recorded together with all follow-up action.
- At an appropriate time pupils or service users and staff involved should have an opportunity to discuss the matter with a senior member of staff.
- In principle, any written reports should be shared with the person, whose view of the incident should be sought as soon as possible after the incident.
- Parents/carers/advocates should always be informed of what has happened to their child or young person. They should be offered an opportunity to discuss this with the Headteacher/Manager or a senior member of staff.
- Consideration should be given to the possible effects that physical intervention has on staff. Apart from suffering physical injury staff may experience some degree of shock. Staff should feel free to discuss the incident and their actions with a professional friend in a calm and private environment.
- Members of staff should be advised to contact their Professional Association or Trade Union before making any **formal statement** about the incident.

Dealing with complaints and allegations

Depending upon the nature of the complaint or allegation, they may be dealt with in a number of different ways:

- By the police if it is alleged that a crime may have been committed
- Under Child Protection/Vulnerable Adult Procedures if it is alleged that abuse may have been perpetrated
- Under the service's complaints procedure

It is likely that most incidents will be investigated under the latter procedure

Parents/carers/advocates and pupils or service users have a right to complain about actions taken by staff. This might include the use of force. Schools and services need to make that clear. If a specific allegation of abuse is made against a member of staff then the establishment needs to follow the guidance set out in *Safeguarding Children and Safer Recruitment in Education* (www.everychildmatters.gov.uk/resources-and-practice/IG00175). Other complaints should be dealt with under the services complaints procedure which should be widely available to pupils and service users and their parents/carers/advocates.

THE DfE provides a toolkit to act as a guide to schools, providing suggestions on how to handle complaints. This Toolkit is available at www.governornet.co.uk/cropArticle.cfm?topicAreaId=9&contentId=402&mode=bq

In such circumstances it would be for the head teacher/manager to respond to the complaint in the light of the service's policy and procedure. Parents/carers/advocates may choose to appeal against the head teacher's/manager's response. At this point the matter would be considered under the next stage of the appropriate complaints procedure.

The full involvement of those with parental responsibility following the incident should minimise the chances of a complaint about use of force but it will not prevent all complaints or allegations. Allegations can be made from a variety of sources, not just from the parents or children involved.

A dispute might lead to an allegation against a member of staff, made to the establishment, other agencies or even the police. These should be dealt with in accordance with agreed policy and procedure for handling allegations against staff. Establishments can find guidance on safeguarding children and on dealing with allegations of abuse against teachers and other staff in *Safeguarding Children and Safer Recruitment in Education* at the web address above (). The establishments policy and the degree to which it had been followed will be at the core of any investigation. Such complaints may also be investigated under the establishments disciplinary procedure.

Disability and Physical Intervention

Those exercising the power to use force must also take account of any particular special educational need, learning disability or other disability that a pupil or service user may have. Under the Disability Discrimination legislation establishments have 2 key duties;

- a) not to treat a pupil or service user less favourably, for a reason relating to their disability, than someone to whom that reason does not apply without justification; and
- b) to take reasonable steps to avoid putting disabled pupils and service users at a substantial disadvantage to those who are not disabled (known as the reasonable adjustment duty www.teachernet.gov.uk/wholeschool/sen/disabilityandthedda/ddapart0/)

As use of restrictive physical intervention involves the use of force to some degree there is always the risk of injury either to the pupil or service user and/or the staff involved. Staff should be sure that the risk of not intervening outweighs the risk of intervening before deciding on the appropriate course of action. Thus risk assessment must be a key consideration in any establishments policy or individual programme planning. This risk assessment must in order to be complete take into account any specific issues relating to disability.

GUIDELINES ON PHYSICAL INTERVENTION (RESTRAINT) IN SCHOOLS

APPENDIX 1

INCIDENT REPORTING - WHAT TO DO

1. A copy of the attached “Restrictive Physical Intervention Record of Incident” form must be completed following every Physical Intervention. The form to be completed as soon as possible in line with the guidance in the school policy.
2. The form must be passed to the Headteacher immediately it is completed.
3. All witness statement taken in accordance with the guidance should be attached to the form by the Headteacher/relevant senior member of staff who undertakes the witness interviews.
4. A copy of the form should be filed confidentially in the School’s record system and a copy should also be sent under confidential cover to the Children and Younger Adults Health and Safety Section at County Hall.

**RESTRICTIVE PHYSICAL (RESTRAINT)
Record of Incident**

Date of Incident:	
Name of School:	

1. Names of those Involved:
Staff: _____ Others: _____
Pupil(s): _____

2. Time of Incident:
Location: _____

3. Events leading up to physical intervention (including alternative strategies used):

4. Account of actual incident (include details of actions, method of restraint, words used, witnesses, etc)

5. Outcome/resolution of incident:

6. Follow up actions (advice to carers, support for staff and pupils involved etc):

7. Names of witnesses and attached witness accounts (signed by witness):

8. Record if any injury/damage to property:

9. When and how those with Parental Responsibility were informed

10. Has any complaint been logged YES/NO

Report completed by	Report checked by
Signed	Signed
Position	Position
Date	Date

To Be Kept In a Central School File and Copy Sent To Children and Younger Adults Health and Safety Section